

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | T.G. | | 6/20/01 |
| O.I.P.E. CLASSIFIER | ma | | 6/20/01 |
| FORMALITY REVIEW | TH | 1118 | 8-10-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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